R→F

3 boxes

Prescription Order Form

697 Waverly Street, Framingham MA 01702
800.994.6322, 508.820.0606.
FAX 888.820.0583 or 508.820.1616

DATE: 2-21-12

NAME OF FACILITY: Massachusetts Eye + Ear Infirmary PHONE NUMBER: 617 573 3299

ADDRESS: 243 Charles St Boston CONTACT NAME: Jo, Tammy, Michael, Jody P.O. #: 65084

We must have Facility name & address to process your prescription order. *Thank you.*

Name of Patient	Name of medication to be compounded	Strength (%, mg/ml, u/ml)	If *preservative-free*, write in p/f	Unit size (mL, gm…)	# of units	Directions
	Eye Block:					
Per Agreement	Lidocaine	1%	PF	10mL	300	
	Bupivicaine	0.375%				
	Hyaluronidase	5units/ml				

NEW ENGLAND COMPOUNDING CTR
697 WAVERLY ST. FRAMINGHAM, MA 01702
800-994-6322 BN5927819 NABP #2237445
Caution: Federal law prohibits transfer of this drug to any other person than patient for whom prescribed.
Rx 1320236 SUNIL EAPPEN
MASS EYE AND EAR INFIRMARY
243 CHARLES ST BOSTON, MA 02114
LIDO/BUPIV/HYAL (PF) 1%-0.375%-5U/ML INJE
3000 ML Lot#02212012@91 Discard after 3/22/2012
USE AS DIRECTED
*****REFRIGERATE*****
BJC No refills authorized BJC 2/23/2012

"EYE BLOCK"
Lidocaine 1%
Bupivacaine 0.375%
Hyaluronidase 5 Units/mL
Preservative – free
Single use only
Refrigerate
Lot# 02212012@91
Exp. 03/22/2012
697 Waverly St. Framingham, MA 01702
10 mL
99700100228

Physician's Name/Signature: Dr Sunil Eappen DEA Number:

For NECC Use Only

Verification: Institutional Agent: Michael NECC Agent: Leeah QB: ✓ Date: 2/21/12 Time: 2:20

V102309

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MASS EYE & EAR PHARM
6175733545
02/21/2012 13:53
USA00210443